

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		imple: If typing or the lines.	ı, type	12FE4M5	designostation in the Color	R (L. i\
L	Check if different than previously reported. (ACC) FEC IDENTIFICATION NUCLEUR (ACC)	18.8.5.9C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C	<u> </u>		e 10	•		DISTRICT
4.	TYPE OF REPORT (Che (a) Quarterly Reports: April 15 Quarterly R July 15 Quarterly R October 15 Quarter January 31 Year-En	deport (Q1) eport (Q2) by Report (Q3) d Report (YE) (c)	Election on	Election Repo Primary (12P) Convention (1	2C)	Special (1	in the State of OR)	off (12R)
5. Covering Period 04/01/2014 through 06/30/30/30/4 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Gabrielle R LeDoux Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.								
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